



Last Updated: 03/09/2022

Pending Cancellation of DMAS Disaster Relief Health Care Coverage for Victims of Hurricane Katrina

The purpose of this memorandum is to inform you that the temporary, fee-for-service DMAS health care coverage for victims of Hurricane Katrina (outlined in the September 8, 2005 Medicaid Memorandum) will be phased out based on the date of application for these clients.

The table below provides the benefit cancellation dates based on the month of enrollment for Katrina evacuees:

Month of Application	Benefit Cancellation Date
September 2005	January 31, 2006
October 2005	February 28, 2006
November 2005	March 31, 2006
December 2005	January 31, 2006

All Katrina evacuees will be given notice of the cancellation of their benefits by mail prior to the date of their cancellation.

As previously indicated in the September 8, 2005 Medicaid Memorandum, Virginia Medicaid providers rendering services to Katrina evacuees need to verify eligibility on the date a service is to be performed through the MediCall voice response system or the web-based Internet eligibility verification option. These automated eligibility verification options are discussed in the paragraph below. Both systems will be updated to reflect the benefit cancellation dates for Katrina evacuees as outlined above. DMAS will no longer pay claims with dates of service after the coverage cancellation date for clients enrolled in this program, with the exception of acute medical/surgical inpatient hospitalizations reimbursed by the AP Diagnostic Related Group (DRG) methodology. Providers are strongly encouraged to submit claims for the services provided to victims of Hurricane Katrina within six (6) months of the date of service.



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DMAS-covered Katrina evacuees who plan to remain in Virginia, who have chronic or ongoing medical conditions, or who are in long term care settings will be encouraged to apply for Virginia Medicaid or FAMIS benefits through their local Department of Social Services (DSS) office using established Medicaid policies and procedures. However, the enrollee will not automatically be grandfathered for eligibility or services. In addition, DMAS is not guaranteeing Virginia Medicaid or FAMIS benefits for Hurricane Katrina enrollees.

On behalf of Governor Mark R. Warner, Secretary of Health and Human Resources Jane H. Woods, and I, your support of this temporary DMAS program as well as your emergency relief efforts over the last few months for the victims of Hurricane Katrina are greatly appreciated.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the Provider Column to find Medicaid and SLH (State and Local Hospitalization Program) Provider Manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or



MEDICAID MEMO

would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include upcoming changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-provider_newletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.